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June 3, 2005

TO: Each Supervisor

FROM: Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

SUBJECT: **BOARD PASS RATES**

Attached please find a summary of Medical Specialty Board Pass Rates for core residencies in Department of Health Services' hospitals for 2002 through 2004. These results are for first time test takers as requested by your Board. These data demonstrate that the vast majority of our residency programs perform extremely well and that our results regularly meet or exceed national averages. The number of graduates in each program is actually small even for the largest programs, so results have been aggregated for residencies with fewer than ten graduates per year. While these scores present one aspect of the effectiveness of DHS training programs, they should be interpreted with great caution both because of the limitations of these data as well as the fact that the written exam represents only one facet of the evaluation of trainees and training programs.

Data Limitations

The attached tables reflect cumulative performance of residency graduates on the written certification exam as reported by each facility. Multiple training programs at LAC-USC refused to provide the requested information despite the fact that similar forms of this information are available publicly in non-aggregated formats. Since the training program directors at LAC-USC Medical Center are employed by USC Keck School of Medicine and by the County, this failure to respond to your Board request will need to be addressed through changes in the Affiliation Agreement.

There are additional factors that need to be taken into consideration. Some residencies require an oral examination as well, which is generally taken after the written exam has been passed. Some programs require a period of clinical practice prior to sitting for the oral examination. Medical specialties that require both oral and written components often have a "board eligibility" window of several years duration to allow individuals sufficient time to meet all the requirements. As a result, the data presented represent only the

written component, as this is the first step in all board certifying exercises. Another critical limitation in these data is that residency programs do not automatically receive "first-time test taker" results; residents must sign a release to provide their results back to their residency program. Physicians who sit for the various stages of the Boards have the specific right to not have their results shared with their residency programs; reporting to residency programs is optional. While getting self-reported results is of relative value to the training program directors in continuously evaluating and improving programs, it is of significantly less value in an absolute sense because the data is not complete.

Finally, measuring first-time test taker results is not the best explicit measure of residency training success. All residencies are regularly evaluated by the Accreditation Council of Graduate Medical Education (ACGME) or similar certifying organizations for the content and quality of the educational experience. These comprehensive reviews include board performance trend analysis as one of the major review components. A residency program's review status and the length of time granted before the next review cycle are the best comprehensive indicators of our training program's success.

DHS' Board Certification Score Monitoring Program

The Department strongly believes that Board certification monitoring is an important element of residency training program oversight. The appropriate evaluation bar is whether our graduates are ultimately fully Board certified. For all medical specialties, regardless of the number of steps in the certification process, there is a very limited timeframe (generally two years) in which residents must complete all the steps. Thus, the opportunity to repeat a step or retake an exam more than twice is limited.

When any physician applies to join the professional staff of any DHS or private facility here in Los Angeles County, the only question asked is whether or not the applicant is Board certified; this is the market standard for all physicians who work in Southern California regardless of where they trained or where they work at the time of application. Unlike first-time test taker results or various elements of the certification process, Board certification is an objective result that is publicly available and can be independently verified.

The Department has already developed and begun implementation of a process to collect Board certification results. This process uses publicly available data that does not require authorization for release from the residents and does not involve the Universities. Once fully built the database will be refreshed bi-annually. The database development will be completed within 90 days.

TLG:ol

Attachment

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

Medical Specialty Board Pass Rates Written Exam First-time Takers

NA = Not Available
NP= No Program
NR= No Response to Information Request

• Years 2002, 2003 and 2004

Harbor-UCLA Medical Center

Specialty	2002				2003				2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate
Emergency Med	13	13	100%	90%	13	13	100%	93%	13	13	100%	92%
Family Practice	12	12	100%	96%	12	12	100%	89%	12	12	100%	86%
Internal Med	17	17	100%	87%	17	17	100%	92%	17	17	100%	92%
Pediatrics	10	9	90%	NA	10	9	90%	NA	10	9	90%	NA

• Aggregate Years 2002-2004

Specialty	2002-2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate
Anesthesiology	NA			
OB/GYN	13	12	92%	85%
Ortho Surgery	NP			
*Psychiatry	19	19	100%	NA
Radiology	15	14	93%	79%
Surgery	12	12	100%	77%

*Data represents 2002 and 03 results
2004 results not yet published

• Years 2002, 2003 and 2004

King/Drew Medical Center

Specialty	2002				2003				2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate
Emergency Med	13	12	92%	90%	15	15	100%	93%	NA	NA	NA	92%
Family Practice	7	7	100%	96%	8	8	100%	89%	10	10	100%	86%
Internal Med	12	9	75%	87%	10	9	90%	92%	8	8	100%	92%
Pediatrics	12	3	25%	NA	8	4	50%	NA	7	7	100%	NA

• Aggregate Years 2002-2004

Specialty	2002-2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate
Anesthesiology	12	6	50%	77%
OB/GYN	9	5	56%	85%
Ortho Surgery	4	3	75%	NA
Psychiatry	21	15	71%	NA
Radiology	NP			
*Surgery	4	1	25%	77%

*Number taking/passing for 2002 not published

Medical Specialty Board Pass Rates Written Exam First-time Takers

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• Years 2002, 2003 and 2004

LAC+USC Medical Center

Specialty	2002				2003				2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate
Emergency Med	18	18	100%	90%	18	17	94%	93%	NA			
Family Practice	NP											
Internal Med	NR											
Pediatrics					→ Aggregate 2002-04 →				42	32	76%	NA

• Aggregate Years 2002-2004

Specialty	2002-2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate
Anesthesiology	36	23	64%	77%
OB/GYN	NR			
Ortho Surgery	NP			
Psychiatry	NR			
Radiology	NR			
Surgery	19	16	84%	77%

• Years 2002, 2003 and 2004

Olive View-UCLA Medical Center

Specialty	2002				2003				2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate	Number Taking	Number Passing	Pass Rate	National Pass Rate
Emergency Med	NP											
Family Practice	NP											
Internal Med	23	20	87%	87%	18	17	94%	92%	18	18	100%	92%
Pediatrics	NP											

• Aggregate Years 2002-2004

Specialty	2002-2004			
	Number Taking	Number Passing	Pass Rate	National Pass Rate
Anesthesiology	NP			
OB/GYN	NP			
Ortho Surgery	NP			
Psychiatry	NP			
Radiology	NP			
Surgery	NP			